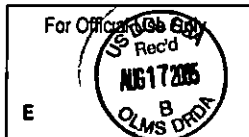


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257 as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT

1 File Number U 8752	2 Fiscal Year Covered From 1 / 1 / 2004 Through 12 / 31 / 2004
3 Name and address of person filing Name Thomas P Gallo P O Box Bldg Room No if any Street 14420 Townsend Road, Suite A City Philadelphia State Pennsylvania ZIP Code + 4 19154	4 Name file number and address of labor organization Name Steamfitters Local Union No 420 Labor Organization File Number 001-114 P O Box Building and Room Number if any Street 14420 Townsend Road Suite A City Philadelphia State Pennsylvania ZIP Code + 4 19154
5 Position in labor organization Business Manager	

Enter appropriate data below if during the past fiscal year you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions)

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent	
6 Name and address of Employer (including trade name if any) Name Trade Name if any P O Box Bldg Room No if any Street City State ZIP Code + 4	7 a Nature of Interest Transaction or Income 7 b Amount

15 Signature and verification The undersigned declares under penalty of Perjury and other applicable penalties of the law that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is to the best of the undersigned's knowledge and belief true, correct, and complete (See the section on penalties in the instructions)

Signed Thomas P. Gallo On 8.10.05 Date 267-350-4200 Telephone Number

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Steamfitters LU No 420 Supp Retirement Plan

Trade Name if any

P O Box Bldg Room No if any

Street 14420 Townsend Road, Suite B

City Philadelphia

State Pennsylvania ZIP Code + 4 19154

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

See attached

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Reimbursement of expenses, including airfare, hotel, meals, and related travel expenses, related to attendance at educational conference/seminar

12 b Amount

\$218

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Steamfitters LU No 420 Health & Welfare Plan

Trade Name if any

P O Box Bldg Room No if any

Street 14420 Townsend Road, Suite B

City Philadelphia

State Pennsylvania

ZIP Code + 4 19154

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State

ZIP Code + 4

11 a Nature of such dealing

See attached

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Reimbursement of expenses, including airfare, hotel, meals, and related travel expenses, related to attendance at educational conference/seminar

12 b Amount

\$173

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Steamfitters LU No 420 Appren Training Fund

Trade Name if any

P O Box Bldg Room No if any

Street 14420 Townsend Road, Suite B

City Philadelphia

State Pennsylvania ZIP Code + 4 19154

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

11 a Nature of such dealing

See attached

11 b Approximate dollar value of such dealing

12 a Nature of interest held or income received

Reimbursement of expenses related to attendance at educational conference/seminar

12 b Amount

\$750

Name of Person Filing Thomas Gallo

File Number U

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Jennings Sigmond

Trade Name if any

P O Box Bldg Room No if any Independence Square

Street The Penn Mutual Towers - 16th Floor

City Philadelphia

State Pennsylvania ZIP Code + 4

9 Business deals with

☒ a Labor Organization☐ b Trust☐ c Employer

10 If 9 b or 9 c is checked give trust or employer's name

Name

Trade Name if any

P O Box Bldg Room No if any

Street

City

State ZIP Code + 4

11 a Nature of such dealing

Provides legal services

11 b Approximate dollar value of such dealing

\$83,827

12 a Nature of interest held or income received

Received gift of holiday fruit basket, which was enjoyed by the office staff/personnel of Steamfitters Local Union No 420

12 b Amount

\$100

Part B Continuation Page

B Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from selling or leasing to or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent or (2) any part of which consists of buying from or selling or leasing directly or indirectly to or otherwise dealing with your labor organization or with a trust in which your labor organization is interested

8 Name and address of Business (including trade name if any)

Name Ark Asset Management

Trade Name if any

P O Box Bldg Room No if any

Street 125 Broad Street

City New York

State New York

ZIP Code + 4 10004⁹

10 If 9 b or 9 c is checked give trust or employer's name

Name Steamfitters LU No 420 Pension Plan

Trade Name if any

P O Box Bldg Room No if any

Street 14420 Townsend Road Suite B

City Philadelphia

State Pennsylvania

ZIP Code + 4 19154

9 Business deals with

☐ a Labor Organization☒ b Trust☐ c Employer

11 a Nature of such dealing

Provided investment management services for assets of the plan

11 b Approximate dollar value of such dealing

\$52 170

12 a Nature of interest held or income received

Dinner meeting on 12/1/04

12 b Amount

\$131

LM-30 Attachment

Name Thomas P Gallo
LM-30 File Number To be assigned

Ending date of report period 12/31/04

LM-30 Items
Number

8, Per direction provided by U S DOL OLMS, Part B includes reporting of transaction(s)
9, including reimbursement of valid expenses by a trust in which the labor organization is
11a interested as though the trust was a business The information for item 11b is not in my
and, possession
11b